

Disclosure Report Cover

Amendment
☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

1. Committee Information			
a. Full Name		c. ID Number	
BRIAN CRUMP FOR SHERIFF		BC06115	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
PO Box 1187 Indian Trail, NC 28079-2187		01/23/2018	
		e. Phone Number	
		704-506-7162	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2017	07/01/2017	12/31/2017	Brian Crump
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<input type="checkbox"/> Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input checked="" type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report		10. Special Report Name	
0			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
First Citizens Bank			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
	01		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 5599.05		\$
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
Brian Crump		01/23/2018	
Printed Name of Signer		Signature of Appointed Treasurer	
FOR OFFICE USE ONLY			
Date Received:	1/24/18	Employee:	KJacumih
Date Postmarked:	NA	Employee:	KJacumih
Date Scanned:		Employee:	
Date Data Entered:		Employee:	
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.			
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment
☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
BRIAN CRUMP FOR SHERIFF		2017 Year End		BC06115	
Start of Election Cycle:		January 1,		2017	
		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 5502.37		\$ 5502.37	
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)		\$	
6) Contributions from Individuals		(CRO-1210)		\$ 500.00	
7) Contributions from Political Party Committees		(CRO-1220)		\$	
8) Contributions from Other Political Committees		(CRO-1230)		\$	
9) Loan Proceeds		(CRO-1410)		\$ 3523.00	
10) Refunds/Reimbursements To the Committee		(CRO-1240)		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		(CRO-1250)		\$	
11b) Contributions from Not-for-Profit Organizations		(CRO-1250)		\$	
11c) Outside Sources of Income		(CRO-1250)		\$	
11d) Legal Expense Fund – Other Sources		(CRO-1270)		\$	
11 e) Exempt Purchase Price Sales		(CRO-1265)		\$	
12) TOTAL RECEIPTS		(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 4023.00	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)		\$ 5472.37	
13b) Contributions to Candidates/Political Committees		(CRO-1310)		\$	
13c) Coordinated Party Expenditures		(CRO-1310)		\$	
14) Aggregated Non-Media Expenditures		(CRO-1315)		\$	
15) Loan Repayments		(CRO-1420)		\$	
16) Refunds/Reimbursements From the Committee		(CRO-1320)		\$	
17) In-Kind Contributions		(CRO-1510)		\$	
18) TOTAL EXPENDITURES		(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 5472.37	
19) Cash on Hand at End		(Add lines 4 and 12 together, then subtract line 18)		\$ 4053.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		(CRO-1330)		\$	
21) Outstanding Loans (incl. ones from other campaigns)		(CRO-1430)		\$	
22) Debts and Obligations owed By the Committee		(CRO-1610)		\$	
23) Debts and Obligations owed To the Committee		(CRO-1620)		\$	
24) Account Transfers Within the Committee		(CRO-1720)		\$	
25) Administrative Support		(CRO-1710)		\$	
26) Forgiven Loans		(CRO-1440)		\$	
27) 48-Hour Notice Reports Sum		(CRO-2220)		\$	
28) Contributions to be Refunded		(CRO-1215)		\$	

CRO-1100

NC State Board of Elections

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August 2008

JAN 24 2018

Union Co. Board of Elections

Contributions from Individuals

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Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
BRIAN CRUMP FOR SHERIFF					BC06115	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Jody Dedmon 1153 Woodwinds Drive Waxhaw, NC 28173			Sales			
			c. Employer's Name/Specific Field			
			Weyerhaeuser			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	BC	Check	Check	07/25/2017	\$ 500.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 500.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 500.00	

CRO-1210

NC State Board of Elections

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April 2007

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Loan Proceeds

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Amendment		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

Use this form to report proceeds from a loan and loan endorser's information
A loan proceeds statement must accompany each loan that is from an individual

1. Committee Full Name (and Fund if applicable) BRIAN CRUMP FOR SHERIFF				2. ID Number BC06115	
3. Lender Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Brian Crump PO Box 1187 Indian Trail, NC 28079-2187				e. Start Date (mm/dd/yyyy)	
				12/23/2017	
				f. End Date (mm/dd/yyyy)	
				12/23/2017	
g. Rate	h. Security Pledged	i. Account Code	j. Form of Payment	k. Amount	
0.00 %		1	Credit Card	\$ 3523.00	
l. Full Name of Lending Institution				m. Loan Number	
4. Endorsers/Makers <i>(The people who guarantee the loan.)</i>					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				%	
				e. Amount	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				%	
				e. Amount	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				%	
				e. Amount	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		c. Employer's Name/Specific Field	
				d. Percentage	
				%	
				e. Amount	
				\$	
5. Total of ALL CRO-1410 Pages				\$ 3523.00	
<i>(This line must be on line 9 of Detailed Summary Page CRO-1100)</i>					

CRO-1410

NC State Board of Elections

April 2007

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JAN 24 2018

Union Co. Board of Elections



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

Kim Westbrook Strach
Executive Director

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JAN 24 2018

Union Co. Board of Elections

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173

Loan Proceeds Statement

This Statement is used to report detailed information about a new loan and is required to accompany the Loan Proceeds Form in the report for which the loan is initially disclosed. If the loan is from an individual, the lender's signature is required on this form.

This Statement is to be filed with the Election Board where the committee's reports are filed.

- Name of committee to receive loan: Brian Crump For Sheriff
- Person or committee to make loan: Brian Crump
- Date of loan to committee: 12/23/17
- Name of lending institution and account number (source):
N/A
- Amount of loan: \$3523.00
- Description (if in-kind loan): Credit Card
- Names of all parties responsible for payment of loan (guarantors):
N/A
- Period of loan: N/A
- Rate of interest of loan: N/A
- Security pledged for loan: N/A

I, _____, acknowledge that all of the information
(Person lending money to committee)
provided is complete, true, and accurate. I further understand I may not forgive a loan
that has an outstanding balance to any source.


Signature of Lender

01/23/2018

Date Signed


Signature of Treasurer of Committee

01/23/2018

Date Signed

CRO-6100

Loan Proceeds Statement

July 2014

Disbursements

Pg 1 of 1

Amendment
☐ Yes ☐ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable) BRIAN CRUMP FOR SHERIFF					2. ID Number BC06115	
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) <input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Rock-a-Print 6115 Vinecrest Dr Indian Land, SC 29707		b. Coordinated Committee Name		d. Comments		
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 3523.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Checking/EFT	B	12/23/2017	\$3523.00	Signs	
				\$		
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Rock-a-Print 6115 Vinecrest Dr Indian Land, SC 29707		b. Coordinated Committee Name		d. Comments		
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 1885.32		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Checking/EFT	B	09/05/2017	\$1885.32	Cards	
				\$		
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) All Star Signs 241 Post Office Dr Ste 7A Indian Trail, NC 28079		b. Coordinated Committee Name		d. Comments		
		c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date \$ 64.05		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	Checking/EFT	B	09/28/2017	\$64.05	Banner	
				\$		
5. Total only this Page					\$ 5472.37	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 5472.37	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (k)						

CRO-1310

NC State Board of Elections

December 2009

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